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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/751,332	12/28/2000	Darwin A. Engwer	3239P069	7669

8791 7590 11/14/2006

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LOS ANGELES, CA 90025-1030

EXAMINER
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ELALLAM, AHMED

ART UNIT	PAPER NUMBER
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2616

DATE MAILED: 11/14/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

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<b>Interview Summary</b>	<b>Application No.</b> 09/751,332	<b>Applicant(s)</b> ENGWER ET AL.	
	<b>Examiner</b> AHMED ELALLAM	<b>Art Unit</b> 2616	

All participants (applicant, applicant's representative, PTO personnel):

- (1) AHMED ELALLAM. (3) \_\_\_\_\_  
 (2) William W. Schaal. (4) \_\_\_\_\_

Date of Interview: 02 November 2006.

Type: a) ☒ Telephonic b) ☐ Video Conference  
 c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.  
 If Yes, brief description: \_\_\_\_\_

Claim(s) discussed: 1,40,51 and 60.

Identification of prior art discussed: none.

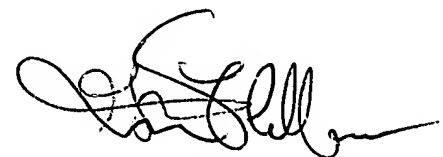
Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Applicant argued about the rejections under 112 1<sup>st</sup> Paragraph (new matter). Examiner asserted that the specification as filed doesn't have support for limitations as recited in claims 40, 51 and 60.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.



Examiner's signature, if required